



ROCHESTER

Minnesota

ETHICS ORDINANCE DISCLOSURE FORM



JUDY SCHERR, CMC

City Clerk

201 4th Street SE, Room 135

Rochester, MN 55904-3742

(507) 328-2900

FAX #(507) 328-2901

NAME: Terry Klampe

ADDRESS: 2112 Viking Dr NW

CITY, STATE, ZIP CODE Rochester MN 55901

1. What is the name of your position, title or job title?

I am a dentist appointed to the energy commission

2. Is this an employed, appointed, or elected position?

3. What is the name of the City department in which you are employed, or City board, commission or elected body on which you serve?

Energy Commission

4. When were you hired, appointed or elected to this position?

For questions 5, 6 and 7, the word "interest" means a substantial financial interest through your ownership of stocks, bonds, notes or other securities. The word "interest" also includes an interest arising from blood, marriage or other personal relationships or close business or political association. The phrase "doing business" means engaged in any contractual relationship with the City or making application for such relationship or for any relief or benefit available from the City including, but not limited to, variance, permit, license or plat approval.

(SEE REVERSE SIDE)

Ethics Ordinance
Disclosure Form
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5. Please list your interests in real property within the City of Rochester, other than your homestead. Complete on a separate page if necessary.

I own a Business "condo" for my practice of
dentistry @ 2112 Viking Dr NW.
I also own 1/6 of McGoon's/Gooneys Bar & Rest/comedy club

6. Please list any interests you have in a business doing business with the City.

None

7. Please list any interest you have in any business located within, or doing business in, the City.

listed above

8. List any and all employment.

Dentist full time

I hereby certify that the above information is complete and accurate.


Signature

12-20-13
Date